



A Service of Hyannis Harbor Tours, Inc.  
 22 Channel Point Road  
 Hyannis, MA 02601-4711  
 (508) 815-2265 HR Office • (508) 778-5966 Fax  
 www.hylinecruises.com

## NEW SEASONAL EMPLOYMENT APPLICATION

FULL NAME: \_\_\_\_\_

PERMANENT ADDRESS: \_\_\_\_\_

(note – W-2 sent here) \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

LOCAL SEASONAL ADDRESS (IF APPLICABLE): \_\_\_\_\_

AGE: 16 OR OVER \_\_\_\_\_ 18 OR OVER \_\_\_\_\_

WHAT POSITION(S) ARE YOU APPLYING FOR? \_\_\_\_\_

What dates are you available? From \_\_\_\_\_ To \_\_\_\_\_

PART-TIME  FULL-TIME  EITHER

How did you hear about this job opportunity? \_\_\_\_\_

If you were referred by a Hy-Line employee please provide their name: \_\_\_\_\_

### EDUCATION:

HIGH SCHOOL: (Name of School) \_\_\_\_\_

DIPLOMA: YES  NO  ADDRESS (Town and State) \_\_\_\_\_

COLLEGE: (Name of School) \_\_\_\_\_

DIPLOMA: YES  NO  If yes, Degree obtained? \_\_\_\_\_

OTHER: \_\_\_\_\_

**Information for Applicants** – It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

**EMPLOYMENT HISTORY (MOST RECENT FIRST) YOU MAY ALSO INCLUDE ANY WORK PERFORMED AS A VOLUNTEER**

**NAME OF COMPANY:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

EMPLOYED FROM: \_\_\_\_\_ TO \_\_\_\_\_ POSITION: \_\_\_\_\_  
MONTH/YEAR MONTH / YEAR

SUPERVISOR'S NAME: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

**NAME OF COMPANY:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

EMPLOYED FROM: \_\_\_\_\_ TO \_\_\_\_\_ POSITION: \_\_\_\_\_  
MONTH/YEAR MONTH / YEAR

SUPERVISOR'S NAME: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

**NAME OF COMPANY:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

EMPLOYED FROM: \_\_\_\_\_ TO \_\_\_\_\_ POSITION: \_\_\_\_\_  
MONTH/YEAR MONTH / YEAR

SUPERVISOR'S NAME: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

**REFERENCES:**

_____ NAME	_____ RELATIONSHIP	_____ PHONE #
_____ NAME	_____ RELATIONSHIP	_____ PHONE #
_____ NAME	_____ RELATIONSHIP	_____ PHONE #

**IF NOT LISTED ABOVE, HAVE YOU WORKED FOR HY-LINE BEFORE? IF SO, WHEN** \_\_\_\_\_

**RELATIVES OR FRIENDS EMPLOYED BY HY-LINE:** \_\_\_\_\_

The information I have provided on this application is true and complete. I understand that any false statement or significant omission by me in the application or application process may be grounds for denial of employment or for immediate dismissal if discovered at a later date.

I authorize Hy-Line Cruises to verify any and all information contained in this application. Yes  No

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_